

# San Luis Obispo County

## VOLUNTEER OPPORTUNITY



Thank you for your interest in volunteering at the Animal Services Division. Volunteers have the opportunity to participate in a wide variety of activities ranging from basic animal care to participating in parades and more. Regardless of the activities in which you choose to participate, you have the opportunity to make a very valuable contribution to the life of the animals at the shelter when you volunteer. Your concern and dedication as a volunteer is greatly appreciated by both the animals and the Animal Services Division.

### Personal Information

Name: \_\_\_\_\_  
 (Last) (First) (M.I.)  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 (Street) (Home)  
 (City) (State) (Zip) (Alternate)  
 Driver's License \_\_\_\_\_ Email: \_\_\_\_\_  
 (Number) (State)

### About You

If you are applying for a specific volunteer job described in a recent recruitment announcement, please list the title of that job:

\_\_\_\_\_

Do you have animals at home?

☐ Dog ☐ Cat ☐ Birds ☐ Reptile ☐ Small mammal ☐ Horse ☐ Livestock

What kinds of animals are you interested in working with? What is your level of experience with each group? (check all that apply)

☐ Dogs ☐ None ☐ Minimal ☐ Moderate ☐ Significant  
☐ Cats ☐ None ☐ Minimal ☐ Moderate ☐ Significant  
☐ Rabbits ☐ None ☐ Minimal ☐ Moderate ☐ Significant

What sort of activities are you interested in?

☐ Walking dogs ☐ Socializing cats ☐ Kids Camp (summer)  
☐ Adoption counseling ☐ Adopt-a-pet events ☐ Office work  
☐ Fostering animals ☐ Heeling touch ☐ Photographer/assistant  
☐ Nursing care ☐ Phone work ☐ Public speaking

Do you have any special skills or experience? \_\_\_\_\_

\_\_\_\_\_

When are you interested in volunteering?

Mon		Tues		Wed		Thurs		Fri		Sat		Sun	
AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM

Where did you learn about volunteering at the shelter? \_\_\_\_\_

\_\_\_\_\_

# San Luis Obispo County

## VOLUNTEER OPPORTUNITY



### Emergency Contact Information

Name: \_\_\_\_\_  
(Last) (First) (M.I.)

Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Street) (Home)

\_\_\_\_\_  
(City) (State) (Zip) (Alternate)

Relationship: \_\_\_\_\_

### Risk Advisement and Liability Waiver

I understand and accept that there are certain risks involved with working in a kennel environment, handling animals, and other activities which I may engage in as a volunteer for Animal Services. Such risks may include, but are not limited to, potential animal bites or scratches and illnesses which may be transferred from animals to people. Furthermore, I am aware that certain illnesses may be transmitted to my own animals and that it is solely my responsibility to ensure that proper preventative measures are taken to ensure their health. I understand that treatment for injuries or work related conditions resulting from my volunteer activities as an Animal Services volunteer are covered under the County's worker's compensation program. I accept that this program is my sole recourse for compensation related to any injury or illness I may sustain as a result of my volunteer activities with Animal Services .

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Name – Print)

### Animal Services Use Only

#### Staff

Orientation Completed by \_\_\_\_\_ Date \_\_\_\_\_

#### Staff Only

Received by staff \_\_\_\_\_ Date \_\_\_\_\_

Copy of Driver's License ☐

Application Approved:

☐ Yes ☐ No

\_\_\_\_\_  
(Animal Services Manager)